NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:

Tuberculosis Control-Ambulatory Care Services

STATUTORY AUTHORITY:

Public Health Services Act. Section 301 (A), page 43; Section 317 (A10, page 72-75; State Appropriations Act [Public Law 1994, Chapter 67])

GRANT PROGRAM NO. 04-37-TB **TYPE OF AWARDS TO BE ISSUED:**

Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:

To provide ambulatory care services for tuberculosis control, surveillance and prevention

AMOUNT OF MONEY IN THE GRANT PROGRAM:

Approximately \$1,000,000 in state funds should be available in the 2004 grant year. Awards will be made for a 12-month budget period beginning July 1, 2003. Funding estimates will vary and are subject to state and federal appropriations.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

- 1. Terms and Conditions for the Administration of Grants
- 2. General and specific Grant Compliance requirements issued by the Granting Agency.
- 3. Applicable Federal Cost Principles relating to the Applicant

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

New Jersey Department of Health and Senior Services recognized chest clinics, Local Health Departments, or County government in agreement with Local Health Department.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

The areas to be served must, during the three previous calendar years, either be (1) a county with an average of 45 or more verified TB cases or have a case rate of 13.5 or more per 100,000 population or (2) contain a city having a population of 75,000 or more with an average number of 13 or more verified TB cases or an average case rate of 15.0 or more per 100,000 population.

APPLICATION PROCEDURES:

Complete and submit a New Jersey Department of Health and Senior Services application for a grant.

FOR INFORMATION CONTACT:

Manager, Tuberculosis Program

New Jersey Department of Health and Senior Services

PO Box 369

Trenton. New Jersey 08625-0369

TELEPHONE: 609-588-7522

FAX: 609-588-7562

E-MAIL: thomas.privett@doh.state.nj.us

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED AND DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:

Varies. Information will be included in formal request for application. Date by which applicant must be notified by grant award: Usually one month prior to the funding period.
